





## DECLARATION, POWER OF ATTORNEY AND POWER TO INSPECT

As a below named inventor, I hereby declare:

that my residence, post office address and citizenship are as stated below next to my name;

Vthat I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original first and joint inventor (if plural inventors are named below) of the invention entitled: BINDING ASSAY EMPLOYING LABELLED REAGENT

the specification of which [check one(s) applicable] X was filed 15 October 1992 as International Application No. PCT/GB92/01892 and was amended by Amendment filed (if applicable); [or]; is attached to this Declaration, Power of Attorney and Power to Inspect;

that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above; and

that I acknowledge my duty to disclose information which is material to the examination of this application in accordance with Rule 56(a) [37CFR§1.56(a)].

CLAIM UNDER 35 USC §119: I hereby claim foreign priority benefits under 37 USC §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

## Prior Foreign Application(s)

Application No.	Country	Filing Date Day-Mo-Year	Priority Claimed Yes - No
9121873.5	GB	15 October 1991	X
9221094.7	GB	7 October 1992	X

POWER OF ATTORNEY: As inventor, I hereby appoint <u>DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.</u> of Philadelphia, PA, and the following individual(s) as my attorneys or agents with full power of substitution to prosecute this application and to transact all business in the <u>Patent</u> and <u>Trademark Office</u> connected therewith: <u>Patrick J. Hagan, Reg. No. 27,643 and</u> Henry H. Skillman, Reg. No. 17,352

POWER TO INSPECT: I hereby give DANN, DORFMAN, HERRELL AND SKILLMAN, P.C. of Philadelphia, PA or its duly accredited representatives power to inspect and obtain copies of the papers on file relating to this application.

SEND CORRESPONDENCE TO: DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.

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> Chu Last

of Medicine

Zip Code

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

	SOLE OR FIRST JOINT INVENTOR	SECOND JOINT INVENTOR (IF ANY)			
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